PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10-655-224

RATE FEE RATE FEE	CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CHARGEABLE CLAIMS	TOTAL CLAIMS										1		
TOTAL CHARGEABLE CLAIMS	FO	R		 	NUMBER FILED		BER EXTRA				OR		
MULTIPLE DEPENDENT CLAIM PRESENT	то	TAL CHARGEA	BLE CLAIMS	(S mir	(S minus 20=		*		X\$ 9=		1		
* If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) * CLAIMS REMAINING AFTER AMENDENT PREVIOUSLY PAID FOR AMENDMENT	IND	EPENDENT CL	AIMS	2 minus 3 =		*			X42=		1	X84=	
* If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II (Column 1) CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR Total ABODIT FEE CLAIMS REMAINING AFTER AMENDMENT REMAINING REMAI	MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT					+140=		1		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PRESENTATION OF MULTIPLE DEPENDENT CLAIM Total (Column 1) (Column 2) (Column 3) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM Total (Column 1) (Column 2) (Column 3) FRATE ADDI- TOTAL OR ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE OR X\$18= ADDI- TOTAL ADDIT. FEE OR ADDIT. FEE OR X\$18= ADDI- TIONAL FEE OR ADDIT. FEE OR X\$18= ADDI- TOTAL ADDIT. FEE OR X\$18= OR X\$18= OR ADDIT. FEE OR ADDIT. FEE OR X\$18= ADDI- TIONAL FEE OR ADDIT. FEE OR X\$18= ADDI- TIONAL FEE OR ADDIT. FEE OR X\$18= OR X\$18= OR TOTAL ADDIT. FEE OR X\$18= OR X\$20= OR X\$18= OR X\$18= OR X\$20= OR X\$20= OR X\$31= OR X\$42= OR X\$42=	* If	the difference	in column 1 is	less than ze	∍ro, enter	r "0" in c	column 2	1			4 1		750
CLAIMS REMAINING AFTER PREVIOUSLY PRIOREST EXTRA FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM FEE ADDIT TIONAL FE		C	LAIMS AS A	MENDED) - PAR	T II						OTHER THAN	
REMAINING							(Column 3)	, ,	SMALL		OR	SMALL	
HRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	ENT A		REMAINING AFTER		NUMI PREVIO	IBER OUSLY	1		RATE	TIONAL		RATE	TIONAL
Total * Minus *** = ADDI- FEE	NON				**				X\$ 9=		OR	X\$18=	
140	AME		<u> </u>		<u> 1</u>	TOLAIM			X42=		OR	X84=	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST NUMBER PREVIOUSLY PRESENT EXTRA ADDI-FEE		FINOLITIESE	NIAHON OF INC	JUHPLE DE	'ENDEM	CLAIIVI		1	+140=		OR	+280=	
Column 1)								L			OR		
CLAIMS REMAINING AFTER AMENDMENT Total * Minus ** =			(Column 1) (Column 2) (Column 3)						40011, FEE (ADDII. FEC	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	IENT B		REMAINING AFTER		NUMI PREVIO	IBER OUSLY	PRESENT		RATE	TIONAL		RATE	TIONAL
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	QN				**] [X\$ 9=		OR	X\$18=	
(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR Total * Independent * Minus ** Minus ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.	AME		<u> </u>		<u> </u>	COL AIM	j		X42=		OR	X84=	
(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT Total Total * Minus *** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.	<u></u>	THOTTIES	NIAHOR OF III.	LIITLE DE	ENDEN	CLAIIVI		, L	+140=			+280=	
CLAIMS REMAINING AFTER AMENDMENT Total Independent								►			OR	TOTAL ADDIT. FEE	
REMAINING AFTER AMENDMENT Total * Minus *** Independent * Minus *** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.		<u> </u>		(Column 3)									
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.	NDMENT C		REMAINING AFTER		NUMI PREVIC	IBER OUSLY			RATE	TIONAL		RATE	TIONAL
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.			*	 	**		=		X\$ 9=		OR	X\$18=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.	AME				<u> </u>	. =			X42=			X84=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.		FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
TOTAL TOTAL	*	f the entry in colu	mn 1 is less than th	ne entry in colu	ımn 2, write	∍ "0" in co	olumn 3.	L			OR		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.	**	If the "Highest Nur If the "Highest Nur	mber Previously Pa Imber Previously Pa	aid For" IN THIS aid For" IN THIS	IS SPACE is	is less tha is less tha	an 20, enter "20." an 3. enter "3."	^	DDIT. FEE				